

EFFECTIVE

October 1, 2023.

Subject(s)

1. FOM 722-03F, Approved Absences from Foster Care Placement.
2. FOM 903-09, Case Service Payments.

1) FOM 722-03F, APPROVED ABSENCES FROM FOSTER CARE PLACEMENT

Respite care is short term care and supervision of a child who is an abuse and/or neglect ward, including dual wards, and juvenile justice wards in any of the following placements: licensed foster home, relative caregiver home, adoptive home, legal parents or guardians, and court ordered placements. Children who are a part of the Serious Emotional Disturbances Waiver (SEDW) and were referred by Community Mental Health (CMH), whether they are placed in foster care or not, qualify for respite. Respite is available to provide temporary and occasional relief to the child and the child's current placement caregiver, parent, or legal guardian to maintain the ability to meet the needs of the child and to support the well-being of the current placement caregiver. Caring for the needs of children who have experienced the trauma of neglect and/or abuse requires intensive time, effort, and skill. Respite services can be provided by licensed or unlicensed providers; see [SRM 109, Respite Services and Engagement](#).

Reason: To establish a new program and policy from the Governor's office.

Grammatical and hyperlink changes.

Reason: Clarification from the Child Welfare Policy & Legislation Office.

**2) FOM 903-09, CASE
SERVICE
PAYMENTS****Special Clothing Authorizations**

Children who request or require gender-neutral or differently gendered clothing that does not correspond to clothing currently owned or available. Comments must be added to the case service authorization, no documentation needs to be uploaded to the authorization.

Medical Expense

Medical expenses not otherwise covered by Medicaid no longer need Federal Compliance Division (FCD) pre-approval.

Dental Treatment

Dental expenses not otherwise covered by Medicaid no longer need FCD pre-approval.

Mental Health-Psychological Evaluation for the Child

Expansion of services covered to include the following as deemed necessary by the case manager and supervisor:

- Neuropsychiatric evaluations.
- Autism/applied behavioral analysis (ABA) evaluations.
- Psychological testing.
- Intelligence quotient (IQ) testing.
- Psychosexual assessment.
- Gender identity assessment.
- Sex offender assessments for parents, only eligible under juvenile justice case services.

Maximum caps of \$500 and \$800, respectively, are lifted for psychological and psychiatric assessments.

Transportation

Updated to reflect increase in provider mileage reimbursement rate, \$.655.

Note: Rate increase effective January 1, 2023.

Foster Parent/Relative Transportation Reimbursement

Parental/sibling visitation travel over 250 miles no longer need FCD pre-approval. The requirement for form MDHHS-5822, Pre-Approval Request for Foster Parent Mileage Reimbursement for Visitation Travel Over 250 Miles Round Trip, is also rescinded.

Assisted Care

The requirement for FCD pre-approval for assisted care over eight hours per day is rescinded. The reference to the eight-hour maximum in policy is obsoleted.

Local office or placement agency foster care (PAFC) supervisors may approve case service authorization. The county director must also approve the request, which may be documented via email. Documentation, including the local office memo to support additional needed hours, must be uploaded to the case service authorization.

Reason: Clarification from FCD.

Respite Care

There will be 12 days of respite available for each eligible child, per quarter. If a child changes placements, the number of respite days can be replenished to provide the new placement caregiver with adequate options for respite use.

Payment for Respite Care

DOC Level	Respite Daily Rate	Respite Half Day Rate
No DOC	\$60.72	\$30.36
DOC Level 1 & 2	\$65.48	\$32.74
DOC Level 3 & 4	\$72.26	\$36.13
MF Level 1 & 2	\$72.26	\$36.13
MF Level 3 & 4	\$83.28	\$41.64

*MF= Medically fragile.

Note: Discretionary funds may be available for activities and travel in rare and approved instances.

Reason: To establish a new program and policy from the Governor's office.

Reimbursement for Property Damages

Case managers and supervisors may determine appropriateness of reimbursing caregivers for damages done to their property by children in their care, not otherwise covered by homeowners or automobile insurance.

This reimbursement can include the caregiver's insurance deductible when an insurance claim for damages is filed. The local office or PAFC supervisor may approve the case service authorization. Local office director approval must be documented in the authorization.

Reimbursement requests above \$5,000 must be reviewed and approved by the BSC director.

Documentation of damage, as well as estimates, receipts and invoices or other reimbursement documentation, must be uploaded to the case service.

These payments cannot be made from title IV-E funds.

Reason: Clarification from FCD.

Reimbursement for Counseling/Therapy

The DHS-3469-COUN, Statement of Expenditures, has been replaced with the MDHHS-5974, Procurement Contract Invoice.

Reason: Child Welfare Policy & Legislation Office clarification.

**MANUAL
MAINTENANCE
INSTRUCTIONS**

Changed Items ...

[FOM 722-03F](#)

[FOM 903-09](#)